## **Grand Circle Travel Group Sales Reservation Form**

Complete and mail to Ann Thomas, 16E15.

Group Name: NRC Group Number:	: Group	Service Code:	
Trip: Ireland in Depth Christmas T			
Departure Date:	-	re City: Washington,	
insert		oreferred departure of	
Extension: Pre-Trip	Post-Trip	(if appl	licable)
Name(s): (legal name(s) from passpo	orts)		
Address:			
Phone: ()Email:			
Will you be sharing accommodation: With (name)	•		
I prefer single accommodations at a I would like to request a share to be			
tours) Male Female			
Payment Information*			
My check or money order in the amo Grand Circle Travel)	ount of \$	is enclosed. Plo	ease make out to
OR (check one) Master card Express	Visa	Discover	American
I authorize a deposit of \$	for	_person(s)	
Card #:		Exp. Date:	
Card Holder name:			
I understand the conditions and acco	ept them on beh	ealf of myself and my	y party.
Card Holder Signature:			
*Deposit is refundable, less a \$150 process departure. For cancellations received with			

free customer service available to you once your reservation has been made at 1-800-597-2452, option #1.